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Recommendation for funding for a short-duration country programme**

Burundi

Summary

The present document contains a recommendation for funding from regular resources and other resources for the country programme of Burundi with duration of three years to support activities that will lead to the preparation of a full-length country programme. The Executive Director *recommends* that the Executive Board approve the amount of $8,006,000 from regular resources, subject to the availability of funds, and $23,884,000 from other resources, subject to the availability of specific-purpose contributions, for the period 2002 to 2004.

* E/ICEF/2001/12.

** The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 2000. They will be contained in the summary of recommendations for regular resources and other resources programmes for 2001 (E/ICEF/2001/P/L.73).

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Basic data [a] *(1999 unless otherwise stated)*	
Child population (millions, under 18 years)	3.4
U5MR (per 1,000 live births) (2000)	190
IMR (per 1,000 live births) (2000)	114
Underweight (% moderate and severe) (2000)	45
Maternal mortality ratio (per 100,000 live births)	..
Literacy (% male/female) (2000)	56/41
Primary school attendance (% net, male/female) (2000)	49/44
Primary school children reaching grade 5 (%) (1992)	74
Use of improved drinking water sources (%) (2000)	78
Routine EPI vaccines financed by Government (%) (1998)	2
GNP per capita (US$)	120
One-year-olds fully immunized against:	
Tuberculosis	84 per cent
Diphtheria/pertussis/tetanus	63 per cent
Measles	75 per cent
Poliomyelitis	65 per cent
Pregnant women immunized against tetanus	60 per cent

[a] Excerpted from the publication "Progress since the World Summit for Children: A statistical review", prepared as a supplement to the Secretary-General's report "We the children: End-decade review of the follow-up to the World Summit for Children" (A/S-27/3), and therefore may differ from data contained in the text of this document.

The situation of children and women

1. Eight years of civil war in which over 200,000 lives have been lost, deteriorating social infrastructure and severe drought have resulted in an increasingly vulnerable population. Left with insufficient access to food and basic social services, limited economic opportunities, and disintegrating community support and caring mechanisms, the population is subject to continuing disease, trauma and displacement. Between 1992 and 1997, life expectancy fell from 53.8 to 42 years, and the gross national product dropped from $240 in 1993 to $120 in 1999. The Human Development Indicator report of 1998 classifies Burundi as number 170 out of 174 countries.

2. On 28 August 2000, 19 parties signed the Arusha Peace Accord, except the two main rebel groups. Implementation of this Accord, which establishes the framework for a representative and durable peace, is threatened by the absence of a cease-fire and transitional institutions. During the first quarter of 2001, the already precarious security situation worsened when conflict escalated around the capital, Bujumbura, and in southern and central Burundi. The successful implementation of the Arusha Accord could lead to the return and reintegration of over 400,500 refugees and 379,000 displaced persons. Should the process fail, more violence, and further destruction of infrastructure and displacement of populations will continue. Regardless of the scenario that may unfold, the humanitarian community in Burundi

will continue to provide for these populations, while encouraging peaceful reconciliation.

3. The most fundamental rights of children and women — to peace, protection, survival, development and participation — are violated. Women hold few positions of power, and continue to be subject to physical and sexual violence. Existing legal institutions and policies do not protect fundamental rights as outlined in the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, but rather continue to perpetuate a culture of discrimination, as acknowledged in the Government's report to the Committee on the Rights of the Child in 1997. Internally displaced persons (IDPs) are extremely vulnerable and receive inadequate assistance and protection measures. They are difficult to access and are frequently victimized by both sides of the conflict.

4. Burundi has some of the worst health indicators in the world, and continues to register increasing infant and maternal mortality rates. In 2000, severe malnutrition, epidemic levels of malaria and measles, and a rise in cholera cases and bacillary dysentery hit the country. The decline in the rate of exclusive breastfeeding, from 89 per cent in 1987 to 71 per cent in 2000, signalled deteriorating child-care practices. Under-five chronic malnutrition rates rose from 48 per cent in 1987 to 56.8 per cent in 2000. The number of cases of HIV/AIDS continues to rise dramatically, particularly in rural areas. In 1989, the overall HIV infection rate among urban women at prenatal clinics was estimated at 11 per cent and 0.7 per cent in rural areas; but by 2000, it had risen to 18.6 and 7.5 per cent, respectively. There are an estimated 230,000 AIDS orphans.

5. In 2000, only 59 per cent of the Burundian population had access to potable water and 23 per cent to latrines of acceptable standards. Of the displaced population, 88 per cent do not have the minimum requirement for potable water, and 47 per cent live in high-risk hygiene conditions. In 25 per cent of schools, there are no latrines; and in 57 per cent of schools, existing latrines are in poor condition.

6. The net primary school enrolment rate decreased from 52 per cent in 1992 to 47 per cent in 2000. The quality of formal education has suffered greatly as a result of destroyed and dilapidated schools, insufficient resources and materials, and poor quality teaching and learning. This is characterized by high drop-out and repetition rates, low teacher motivation and low achievement rates. Early childhood care and development (ECCD) is inhibited by the absence of a formal programme for young children. Only 43 per cent of girls between the ages of 7 and 12 years attended school in 1999/2000.

Programme cooperation, 2000 and 2001

7. UNICEF continued as the lead agency for the nutrition and water and environmental sanitation (WES) sectors. In addition, UNICEF played a leadership role among United Nations agencies in basic education, children in need of special protection and HIV/AIDS, within the framework of the Joint United Nations Programme on HIV/AIDS (UNAIDS).

8. The health and nutrition programme responded promptly to a significant surge in malnutrition cases during the last quarter of 2000, and in collaboration with the World Food Programme (WFP) and non-governmental organization (NGO) partners,

supported the treatment of 80,000 cases of moderate malnutrition and 4,000 cases of severe malnutrition per month. To tackle severe malaria outbreaks, UNICEF, in collaboration with the World Health Organization (WHO), provided technical assistance for the revision of drug policies, distributed insecticide-treated mosquito nets and provided anti-malarial drugs for the treatment of malaria cases in the seven worst affected provinces. In 2000, National Immunization Days and the measles vaccination campaigns covered 96 and 80 per cent, respectively, of the target population. Community networks for HIV/AIDS prevention and support to AIDS orphans piloted in one province were expanded to six other provinces for which 80 trainers and 1,200 community mobilizers were trained. A project on the prevention of parent/mother-to-child transmission (PMTCT) of HIV was initiated.

9. The WES programme provided clean water to approximately 300,000 persons through displaced persons camps, schools, health centres and the rehabilitation or creation of water systems. An additional 52,000 people benefited from sanitation facilities in regroupment camps. Community capacity in hygiene was strengthened through the training of 40 school officials, 508 members of hygiene committees at IDP sites and primary school hygiene clubs.

10. The education programme enabled approximately 44,400 children to attend school through the temporary construction or rehabilitation of classrooms, and the provision of supplies to 444 classrooms. Another 70,000 indigent children received school materials, and 1,318 education personnel were trained in basic school management techniques and peace education. In collaboration with NGOs, the children in need of special protection project supported the reunification of 870 unaccompanied children and income-generating activities for foster families, and provided psychosocial and non-food assistance to 26,000 distressed children. Approximately 1,036 social and community workers were trained in caring for children in distress.

11. The Government was supported to monitor the situation of children and women, particularly for the preparation of the reports on the Convention on the Rights of the Child and the National Plan of Action. Support was also provided to the National Assembly on activities related to the peace process. Approximately 130 judicial staff and 156 policemen were trained to provide legal assistance. UNICEF also conducted awareness-raising activities for mines and unexploded ordnance. A multiple indicator cluster survey was conducted in 2000.

12. As a result of the challenges posed by the situation in Burundi, the major difficulties faced in the implementation of the 2000 and 2001 country programmes were poor field presence owing to security reasons, inadequate protection of the most vulnerable populations, and insufficient mainstreaming of the rights-based approach and HIV/AIDS prevention into all programmes.

Lessons learned from past cooperation

13. Given the unstable political and security context, it is important that the UNICEF programme be flexible to adapt to changing situations. Based on possible scenarios, the office should be prepared both programmatically and operationally to protect the most vulnerable, respond to the needs of children and women in emergencies, and maintain the uninterrupted delivery of necessary services. Each programme sector will specifically target IDPs. UNICEF will focus on strengthening

support for nutrition, immunization, malaria control, water supply and sanitation, peace education and protection. A strong field presence, along with good partnerships with provincial committees and civil society organizations, will facilitate direct assistance to communities.

14. The malaria, nutrition and IDP crises in the past year highlighted the need to integrate early warning tools into the overall country preparedness plan and to systematically monitor the situation. Combined with an increase in response capacity, the early warning system will enable the office to forecast, define strategies and respond quickly to emerging crises and epidemics.

15. The country programme will endeavour to develop capacity and strengthen community-based structures, raise awareness around programme interventions, ensure the convergence of programme activities, and advocate with the Government and NGO partners for community engagement and capacity development.

16. As a result of the blatant violation of children's and women's rights, rights promotion and child protection should be the cornerstone of all programmes. In accordance with the recommendations of the Committee on the Rights of the Child and the Committee on the Elimination of All Forms of Discrimination against Women, UNICEF will prioritize advocacy for laws and systems that guarantee the protection of children's and women's rights, the protection of children affected by conflict and HIV/AIDS, and the mainstreaming of child protection into all sectoral programmes.

Recommended programme cooperation, 2002-2004

	Estimated annual expenditure (In United States dollars)			
	2002	*2003*	*2004*	*Total*
Regular resources				
Child protection and promotion	209 800	267 900	292 665	770 365
Nutrition and health	514 750	579 750	630 479	1 724 979
HIV/AIDS prevention	209 900	267 900	282 665	760 465
Water and environmental sanitation	220 000	277 900	292 800	790 700
Basic education	229 880	281 480	349 360	860 720
Advocacy, programme communications and planning	314 870	368 270	367 640	1 050 780
Cross-sectoral costs	799 800	635 800	612 391	2 047 991
Subtotal	**2 499 000**	**2 679 000**	**2 828 000**	**8 006 000**
Other resources				
Child protection and promotion	894 920	1 342 380	2 013 570	4 250 870
Nutrition and health	2 404 804	2 275 452	1 793 178	6 473 434
HIV/AIDS prevention	481 880	772 820	1 084 230	2 288 930
Water and environmental sanitation	619 560	929 340	1 394 010	2 942 910
Basic education	1 514 480	1 516 968	1 195 452	4 226 900

	Estimated annual expenditure (In United States dollars)			
	2002	*2003*	*2004*	*Total*
Advocacy, programme communications and planning	275 360	413 040	619 560	1 307 960
Cross-sectoral costs	692 996	800 000	900 000	2 392 996
Subtotal	**6 884 000**	**8 000 000**	**9 000 000**	**23 884 000**
Total	**9 383 000**	**10 679 000**	**11 828 000**	**31 890 000**

Country programme preparation process

17. The new country programme is the product of active discussions held with the Government, NGOs, United Nations partner agencies, the UNICEF Regional Office and headquarters.

Country programme goals and objectives

18. The overall goal of the programme of cooperation is to realize and fulfil the rights of children and women to peace, protection, survival, development and participation.

Programme strategy

19. The country programme will comprise six programmes. The programme strategy will include: advocacy and social mobilization activities to promote the realization of women's and children's rights; improved service delivery; participatory capacity development at the community level; strengthening the capacity of the country office, national institutions and NGO partners to respond in a flexible manner to humanitarian crises; integration of the multisectoral programme components, with particular emphasis on rights promotion, special protection and HIV/AIDS prevention; and targeted programme activities for specific vulnerable groups, particularly children affected by armed conflict and HIV/AIDS, girls, IDPs and other groups lacking access to protection or resources.

20. **Child protection and rights promotion**. This programme will focus on protecting those children most seriously affected by armed conflict and the HIV/AIDS epidemic, while strengthening institutional, judicial and social mechanisms for rights promotion and fulfilment. The key strategies are: raising awareness of children's rights and protection issues at all levels, including its mainstreaming into UNICEF programmes; increasing the accountability of duty bearers in fulfilling children's rights; and undertaking initiatives to address abuses and violations of children's rights. Activities will include: increasing awareness of the responsibility of key duty bearers for the realization, protection and monitoring of children's rights; supporting advocacy, monitoring and harmonization of domestic legislation with the two Conventions and the integration of the Guiding Principles on Internal Displacement into law; training the judiciary and other personnel in the

special needs of children and women who have been subjected to violence and abuse; promoting mine awareness; facilitating the return and reintegration of separated children to their families following tracing and registration; providing social services and psychosocial assistance to war-affected communities; and developing of community capacity to protect its own children from abuse and exploitation.

21. **Nutrition and health**. This programme will focus on the development of a national nutrition policy; life-sustaining activities, such as the provision of therapeutic products, vitamin A and iron folate; and community-based growth monitoring. Communities, caretakers and particularly mothers will be empowered to provide better care to their children. Training and communication materials for nutrition education will be elaborated, technical support to partners for nutritional assessments and case management will be provided, and iodized salt consumption will be promoted. The control of malaria and other endemo-epidemics project will promote the use of mosquito nets, provide anti-malarial drugs for case management and support intermittent treatment of malaria during pregnancy. The maternal and child health component will focus on the community aspect of the Integrated Management of Childhood Illness initiative, support routine immunization and national or subnational immunization days, and safe motherhood. The PMTCT pilot project will go to scale throughout the country. PMTCT will develop communication strategies and be integrated into regular antenatal and post-natal care through the provision of a package of services which will include voluntary and confidential HIV counselling and testing, free anti-retroviral drugs and support to sound infant feeding practices.

22. **HIV/AIDS prevention**. This programme will strengthen the capacities of key partners to incorporate the impact of HIV/AIDS on children, and reinforce their rights in the planning and decision-making processes, with particular attention to behaviour formation and modification. Emphasis will be given to linkages with the PMTCT project within the nutrition and health programme; education and life skills components of the education programme; and the use of appropriate communication strategies for awareness-raising in order to galvanize changes in behaviour formation at the level of communities, families and individuals. Major activities will include: the creation of STOP-AIDS clubs in communities; the training of trainers; peer education; the production of information, education and communication/AIDS training materials; the establishment of counselling and testing services; and the treatment of sexually transmitted diseases for young people. The programme will support the harmonization of activities and messages related to the fight against AIDS, in collaboration with United Nations agencies, UNAIDS in particular, and the Great Lakes Initiative on AIDS.

23. **WES**. This programme will increase access to potable water and a clean and healthy environment. Its main strategy is to use appropriate technologies to reinforce institutional and community capacity through training and logistical support to coordinate, evaluate and implement water and sanitation projects in rural areas. Activities will include: the construction of familial public and temporary latrines, with the involvement of communities; the provision of training, materials and hygiene products; educational campaigns for hygiene, health and AIDS awareness in schools and among IDPs; the elaboration of a national policy on environmental sanitation; training and support of technical resource persons at central, provincial and local levels; the repair of gravity-fed water distribution

systems; the construction or repair of wells equipped with handpumps; water quality monitoring; and retraining community water technicians and/or members of community water boards.

24. **Basic education**. This programme will promote increased primary school enrolment, progression and achievement of all children of school age, and ECCD as a comprehensive and integrated approach. It will expand learning opportunities for all adolescents, with attention to life skills. The main strategies will include: advocacy to support the education of girls and women; strengthening national capacity to develop policies, plans and new approaches to quality teaching and learning, and ECCD programmes; and the involvement of children, adolescents, teachers and local communities in peace education activities and national efforts to stop the spread of HIV/AIDS. The main activities will be: support to educational reforms to develop appropriate policies and programmes; social mobilization campaigns to realize universal access to education, emphasizing girls' education; the repair and equipment of classrooms and school environments; the purchase and distribution of school supplies; teacher training; strengthening family, community and NGO capacity to provide essential care to children between 0-8 years of age; and the review of curricula and development of school manuals for formal and non-formal education, with an emphasis on integrating peace education and life skills.

25. **Advocacy, programme communications and planning**. This programme will increase the visibility of programmes for women and children through developing and maintaining relations with the international and national media, and develop appropriate materials and strategies for information-sharing and advocacy on behalf of the country office for donors, partners and general public. It will provide technical support and identify appropriate strategies for awareness-raising and community mobilization through an integrated communications plan based on research and assessment. Planning, monitoring and evaluation activities will strengthen the capacities of UNICEF, the Government and NGO partners to plan, coordinate, monitor and evaluate programmes.

26. **Cross-sectoral costs** will ensure the availability of administrative, financial, supply and logistics support for implementation of the country programme.

Monitoring and evaluation

27. Programme monitoring and evaluation will be conducted through the integrated monitoring and evaluation plan, programme/project log-frames and indicators. Rapid assessments undertaken in conjunction with other United Nations agencies and NGO partners will be employed to determine the type and quantity of assistance needed for emergency, short-term interventions. In addition to annual reviews, a mid-term review will be undertaken in 2003.

Collaboration with partners

28. UNICEF supports the United Nations coordination system and operational activities, including security matters. UNICEF is working with other United Nations agencies to update the Common Country Assessment, and participates in United Nations Development Assistance Framework (UNDAF) exercises and in the Poverty Reduction Strategic Paper with other partners. The nutrition and health programme

coordinates the United Nations thematic group on nutrition, which includes WFP, the Food and Agriculture Organization of the United Nations, WHO and Office for the Coordinator of Humanitarian Affairs. The WES programme coordinates the United Nations thematic group on WES. UNICEF works with the United Nations Educational, Scientific and Cultural Organization, the Government and the donor community to improve access to and the quality of basic education. As a member of the UNAIDS thematic group, UNICEF coordinates its activities with other agencies addressing the HIV/AIDS epidemic and other country offices of the Great Lakes Region, the Regional Office, and regional networks, such as the Great Lakes Initiative on AIDS. UNICEF will continue to work closely with NGO partners. In conjunction with the humanitarian community, UNICEF will endeavour to improve access and provide better protection to IDPs.

29. To respond to future crises, contingency and emergency preparedness plans are being outlined with other agencies, and the Consolidated Inter-Agency Appeal will be used to fulfil emergency needs. Support from the Governments of Norway, Denmark, Sweden, the United Kingdom, the Netherlands, Belgium, Italy and France, as well as from the European Union, the Office of United States Foreign Disaster Assistance and others, has been greatly appreciated and will continue to enable greater collaboration and enhanced programme implementation in many of the above areas.

Programme management

30. Budget allocations have been determined in function of each programme's ability to mobilize other resources. Regular resources will be used strategically as seed money to bolster the new initiatives for child protection, rights promotion and HIV/AIDS prevention in the proposed programme of cooperation. Other resources targets will be met through regular activity briefings to donor representatives in Burundi, increased linkages with donors within the region and enhanced outreach to non-traditional donors and National Committees for UNICEF. Internal budget controls, strengthened budget management and monitoring capacity will ensure the timely and effective implementation of activities, execution of programme budgets and facilitate the preparation of high-quality donor reports.

31. The Ministry of External Affairs will lead the Committee that will coordinate annual reviews of the overall implementation of the country programme, to assess achievements and constraints, and make adjustments in programme direction as necessary. Sectoral reviews will also be undertaken with the respective ministries. United Nations agencies, bilateral donors, NGOs and other partners will participate in these reviews to ensure the complementarity of activities within the framework of UNDAF.

TABLE

COUNTRY : BURUNDI
PROGRAME : 2002-2004

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET			POSTS a/										STAFF COSTS b/		
	RR	OR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES :																
NUTRITION AND HEALTH	1,724,979		1,724,979	0	0	0	0	0	0	0	1	1	2	0	128,279	128,279
BASIC EDUCATION	860,720		860,720	0	0	0	0	0	0	0	1	1	2	0	128,279	128,279
WATER & ENVIRONMENTAL SANITATION	790,700		790,700	0	0	0	0	0	0	0	1	1	2	0	128,436	128,436
CHILD PROTECTION & RIGHTS PROM.	770,365		770,365	0	0	0	0	0	0	0	1	1	2	0	128,436	128,436
ADVOCACY, PROG. COMM. & PLAN.	1,050,780		1,050,780	0	0	0	0	1	0	1	0	2	3	396,944	126,170	523,114
CROSS-SECTORAL COSTS	2,047,991		2,047,991	0	0	0	0	0	1	1	1	10	12	371,407	489,407	860,814
HIV/AIDS	760,465		760,465	0	0	0	0	0	0	0	1	0	1	0	77,400	77,400
TOTAL RR	8,006,000		8,006,000	0	0	0	0	1	1	2	6	16	24	768,351	1,206,407	1,974,758
OTHER RESOURCES :																
NUTRITION AND HEALTH		6,473,434	6,473,434	0	0	0	1	1	0	2	2	1	5	906,478	180,957	1,087,435
BASIC EDUCATION		4,226,900	4,226,900	0	0	0	1	0	0	1	0	1	2	509,534	26,157	535,691
WATER & ENVIRONMENTAL SANITATION		2,942,910	2,942,910	0	0	0	1	0	0	1	0	1	2	509,534	26,157	535,691
CHILD PROTECTION & RIGHTS PROM.		4,250,870	4,250,870	0	0	0	1	0	0	1	1	0	2	509,534	77,400	586,934
ADVOCACY, PROG. COMM. & PLAN.		1,307,960	1,307,960	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS		2,392,996	2,392,996	0	0	0	0	0	1	1	0	6	7	396,944	173,991	570,935
HIV/AIDS		2,288,930	2,288,930	0	0	0	1	0	0	1	0	0	1	509,534	0	509,534
TOTAL OR		23,884,000	23,884,000	0	0	0	5	1	1	7	3	9	19	3,341,558	484,662	3,826,220
TOTAL RR & OR	8,006,000	23,884,000	31,890,000	0	0	0	5	2	2	9	9	25	43	4,109,909	1,691,069	5,800,978
SUPPORT BUDGET	Operating costs		572,800													
	Staffing			0	1	0	1	3	0	5	2	7	14	2,340,681	424,509	2,765,190
GRAND TOTAL (RR + OR + SB)				0	1	0	6	5	2	14	11	32	57	6,450,590	2,115,578	8,566,168
Number of posts and staff costs:																
Current programme cycle										11	10	30	51			
At the end of proposed programme cycle (indicative only)										14	11	32	57	6,450,590	2,115,578	8,566,168

RR = regular resources.
OR = other resources.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.